



HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

(To be filed by organizations, employing organizations and individuals
other than registered lobbyists)

FORM ORG

1202

HAWAII STATE ETHICS COMMISSION
1001 Bishop Street, ASB Tower Suite 970
Honolulu, Hawaii 96813
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STATE OF HAWAII
STATE ETHICS COMMISSION

06 APR 12 AM 11:31

For lobbying reporting period:
[X] January 1 - last day of February
[] March 1 - April 30
[] May 1 - December 31
Year of Report 20____

Contact person Guy K. Fujimura Phone (808) 949-4161
Organization ILWU Local 142
Mailing Address 451 Atkinson Drive
Honolulu, HI 96814

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement
period was: \$ 1,412.00

EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials		7. Entertainment	
2. Media advertising		8. Food & beverages	
3. Telegraph, telephone and other forms of telecommunication		9. Gifts	
4. Postage		10. Loans	
5. Compensation paid to lobbyists		11. Other disbursements	\$1,412.00
6. Fees (other than to lobbyists)		TOTAL EXPENDITURES	\$1,412.00

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☐ This section is not applicable

☒ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address	Amount or value
See attached	

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☐ This section is not applicable

☒ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address	Amount or value
Jason Medeiros PO Box 188; Kihei, HI 96753	\$496.60

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☒ This section is not applicable

☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

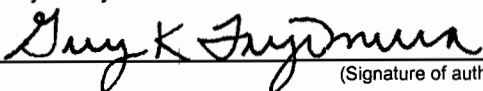
Name & Address	Amount or value

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input checked="" type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input checked="" type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input checked="" type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge



(Signature of authorized person)

4/10/06

(Date)

Name of authorized person (type or print) Guy K. Fujimura

Title of authorized person Secretary-Treasurer

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

<u>NAME</u>	<u>ADDRESS</u>	<u>AMOUNT</u>
Steven West (2/6) (flat rate lost wages)	PO Box 33, Kihei, HI 96753-0033	\$50.00
Henry Oandasan (2/24) (lost wages)	1015 Makalii St, Kahului, HI 96732	\$113.00
Jason Medeiros (2/24) (lost wages)	PO Box 188, Kihei, HI 96753	\$248.30
Daryl Davis (2/16) (lost wages)	15 Koki St, Kihei, HI 96753	\$137.36
Jason Medeiros (3/7) (lost wages)	PO Box 188, Kihei, HI 96753	\$248.30
Brev Blas (2/6-7) (flat rate lost wages)	16-1472 Pahoia Rd, Keaau, HI 96749	\$100.00
Joann Gumahad (2/6-7) (flat rate lost wages)	PO Box 10739, Hilo, HI 96721-5739	\$100.00
Janelle Kanekoa (2/16) (lost wages)	PO Box 12544, Lahaina, HI 96761-7544	\$138.40
Letitia Ii (2/16) (lost wages)	17 Fleming Rd, Lahaina, HI 96761-1768	\$144.08
Lena Staton (2/16) (lost wages)	286 Nehu Pl, Kihei, HI 96753	\$132.56

(Lost wages are paid to make up for the income lost when members take time off from their job to testify at the Legislature.)